Quality Performance Report (QPR) For

lowa FFY 2013

Appendix 1 Quality Performance Report

A1.1 Progress on Overall Goals

Based on the goals described in the Lead Agency's CCDF Plan at Section 3.1.7, please report your progress using the chart below. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the National Resource Center for Health and Safety in Child Care (www.nrckids.org.)

The following changes occured in the state: 1) Fingerprinting 2) Immunizations 3) Use of cell phone

Goals Described in FY 2012-2013 CCDF Plan:

Standardizethe issuance of a provisional license: A child care center is issued either a full or provisional license based on compliance concerns. The licensing unit will develop a decision-tree or indicator system that determines when a provisional license will be issued for a child care center.

Ensure timely and consistent processing of child development home (CDH) registration applications, including data sharing with CCR&R and other key partners): Within the past year, the Department implemented a Centralized Child Care Assistance Unit (CCAU) that processes CCA eligibility,CCA payment, and CDH registration applications/renewals. As a part of the centralization, strategies are being implemented to ensure consistent processing of applications/renewals and improved timeliness in issuing certificates. As partners such as CCR&R are no longer points of distribution for CDH applications, communication strategies need to be implemented to ensure they, and other partners such as CACFP are aware of providers inquiring about becoming registered, regulatory status of providers, etc.

Increase in the number of CDH who have completed ChildNet certification: ChildNet certification is achieved by CDH who have completed 25 hours of training and had a certification visit completed by CCR&R staff. ChildNet certificationassures an increased level of health and safety, quality and monitoring, ascompliance with regulations, participation in CACFP, liability insurance, etc are all required.

Decrease injuries in child care settings by the following strategies: 1) ensure injury reporting/surveillance strategies are developed by HCCI/DHS to provide a method of tracking injuries that occur in regulated child care settings; and 2) determine methods to pull data from HCCI & CCR&R regarding the number of providers completing injury prevention checklists and hazard mitigation plans. Both of these tools are

| pointable criteria in the QRS and provide valuable data for targeting consultation, training and resources. |
|---|
| |
| Goal #1: |

Standardize the issuance of a provisional license: A child care center is issued either a full or provisional license based on compliance concerns. The licensing unit will develop a decision-tree or indicator system that determines when a provisional license will be issued for a child care center.

Describe Progress - Include Examples and Numeric Targets where Possible:

The Child Care Licensing Unit identified an opportunity for greater consistency associated with the issuance of provisional license for child care centers. To assist staff in making the determination as to when a 'provisional' license should be issued, a decision tree was developed. The tool essentially involves the evaluation of risk in relation to the frequency of identified violations to determine a course of action. The area of non-compliance is evaluated to assess risk of harm against any patterns of disregard to licensing rules to determine a course of action. The provider's degree of engagement with licensing staff, their understanding of the non-compliance issue, and their plans to resolve the issue assist in determining necessary actions. As an example, high risk of harm may entail violations related to ratio or staff discipline. Medium risk might be related to training, nutrition, etc. Low risk areas may involve file management issues. A Corrective Action Plan (CAP) is developed if a provider is issued a provisional license. The effort has resulted in a more consistent response by providers and a more structured resolution of provisional licenses by means of the CAP and scheduled oversight by licensing staff. The Lead Agency standardized the use of the tool as a procedural expectation of licensing staff in calendar year 2013. A second phase of data collection is planned to measure compliance with both process and adherence to improvement plans. Not only has there has been a reduction in the number of provisional licenses issued every year since 2010, there has been an increase in the consistency of this intervention and more timely resolution to provisional licenses.

| Goal #2: | |
|-----------------------------------|--------|
| Is Goal from 2012-2013 CCDF Plan? | Yes No |

Is Goal from 2012-2013 CCDF Plan?

✓ Yes
✓ No

Ensure timely and consistent processing of child development home (CDH) registration applications, including data sharing with CCR&R and other key partners): Within the past year, the Department implemented a Centralized Child Care Assistance Unit (CCAU) that processes CCA eligibility,CCA payment, and CDH registration applications/renewals. As a part of the centralization, strategies are being implemented to ensure consistent processing of applications/renewals and improved timeliness in issuing certificates. As partners such as CCR&R are no longer points of distribution for CDH applications, communication strategies need to be implemented to ensure they, and other partners such as CACFP are aware of providers inquiring about becoming registered, regulatory status of providers, etc.

Describe Progress - Include Examples and Numeric Targets where Possible:

An additional Kaizen was completed during this reporting period that was a collaboration between the Lead Agency's Child Care Assistance Unit (CCAU) and the Department of Inspections and Appeals. The scope of the event was to address regulation of Registered CDH's related to recoupment of Child Care Assistance overpayments. In addition, since the last report, additional forms and processes have been

| Goal #3: Is Goal from 2012-2013 CCDF Plan? ✓ Yes ☐ No |
|---|
| Increase in the number of CDH who have completed ChildNet certification: ChildNet certification is achieved by CDH who have completed 25 hours of training and had a certification visit completed by CCR&R staff. ChildNet certification assures an increased level of health and safety, quality and monitoring, as compliance with regulations, participation in CACFP, liability insurance, etc are all required. |
| Describe Progress - Include Examples and Numeric Targets where Possible: |
| As of 7-1-13, 700 of 3,961 child development home providers were ChildNet certified (18%). |
| Goal #4: Is Goal from 2012-2013 CCDF Plan? ✓ Yes □ No |
| Decrease injuries in child care settings by the following strategies: 1) ensure injury reporting/surveillance strategies are developed by HCCI/DHS to provide a method of tracking injuries that occur in regulated child care settings; and 2) determine methods to pull data from HCCI & CCR&R regarding the number of providers completing injury prevention checklists and hazard mitigation plans. Both of these tools are |

put into place to help ensure consistency in processing both CCA recipient and CCA provider

Describe Progress - Include Examples and Numeric Targets where Possible:

The Lead Agency and our Dept. of Public Health/Healthy Child Care Iowa partner currently lack an electronic venue for reporting. The Lead Agency initially requested our HCCI's office assistance in researching and making recommendations regarding injury reporting methodologies that might be implemented for child care providers. Other state's approaches have been researched and compiled and conversations are ongoing to determine an appropriate method for Iowa, including the possibility of a pilot effort. No further significant progress has been made to-date.

pointable criteria in the QRS and provide valuable data for targeting consultation, training and resources.

Due to ongoing assessment this past year of the child care nurse consultant infrastructure in Iowa, the Lead Agency did not pursue planned changes to reporting requirements for CCR&R or HCCI on the completion of injury prevention checklists and hazard mitigation plans by providers. The decision to delay was due also in part to an evaluation of the state's QRS that was underway during this reporting period. The Lead Agency anticipates recommendations that may provide an opportunity for improved data collection within the QRS effort surrounding these injury-prevention related tools.

A1.2 Key Data

applications/renewals.

A1.2.1 Number of licensed programs

a) How many licensed center-based programs operated in the State/Territory as of

| September 30, 2013? 1328 N/A |
|---|
| Describe: |
| Source = KinderTrack |
| b) How many licensed home-based programs operated in the State/Territory as of September 30, 2013? 3892 |
| □ N/A |
| Describe: |
| Home based = registered Child Development Home |
| Source = KinderTrack |
| |
| c) Does the State/Territory have data on the number or percentage of programs (i.e., paid care provided on a regular basis by an unrelated caregiver outside of the child's own home) operating in the State/Territory that are not subject to licensing regulations? |
| Yes If yes, include the number or percentage of programs: |
| Number: Percentage: % |
| Describe: Data is available on the number of non-regulated providers that are paid under the state CCA program but can not factor out by relative status. |
| A purely non-regulated, legally operating provider not paid under the state CCA program could only be extracted from the CCR&R NACCRAWARE data base based on those who request to be listed on the referral data base. |
| ☑ No |
| A1.2.2 What percentage of programs received monitoring visits, and at what frequency, for each provider category during the last fiscal year (October 1, 2012 through September 30, 2013)? |
| a) What percentage of licensed center-based programs were visited as of the end of the last fiscal year (October 1, 2012 through September 30, 2013)? 100% |
| What was the average number of visits? |
| □ N/A Describe: |

| A1.2.3 How many programs had their licenses suspended or revoked due to licensing violations as defined in your State/Territory during the last fiscal year (October 1, 2012 through September 30, 2013)? |
|---|
| Average number of visits for complaints is not tracked. |
| |
| What was the average number of visits? |
| c) What percentage of legally exempt providers, receiving CCDF were visited as of the end of the last fiscal year (October 1, 2012 through September 30, 2013)? % |
| Pending additional resources to support electronic gathering by staff, this data will not be reportable. The Lead Agency's would prefer to report the monitoring expectation by provider type versus an average number of visits across all providers, as it is unclear the value of the latter data. |
| Average # of visits that would comprise both types of visits and complaint visits are not known. |
| Describe: The % reflects the number of homes monitored to meet the state target of 80% during State Fiscal Year 2013 (July 1, 2012-June 30, 2013). |
| What was the average number of visits? |
| b) What percentage of licensed family child care programs were visited as of the end of the last fiscal year (October 1, 2012 through September 30, 2013)? 67.3% |
| Pending additional resources to support electronic gathering by staff, this data will not be reportable. The Lead Agency's would prefer to report the monitoring expectation by provider type versus an average number of visits across all providers, as it is unclear the value of the latter data. |
| Average # of visits that would comprise both types of visits and complaint visits are not known. |
| All licensed programs have an annual visit – either their relicensing visit or as their "off year" unannounced visit. |
| |

How many were **suspended**?

Licensed Centers:

| ™ N/A |
|---|
| Describe: The state does not invoke a "suspended" status for licensed centers or registered home providers. |
| The current regulatory data system does not allow for revocation data to be extracted for homes. |
| How many were <u>revoked</u> ? 1 |
| □ N/A |
| Describe: One center was revoked during this time period. |
| Licensed Homes: |
| How many were <u>suspended</u> ? |
| ☑ N/A |
| Describe: The state does not invoke a "suspended" status for licensed centers or registered home providers. |
| How many were <u>revoked</u> ? |
| ☑ N/A |
| Describe: The current regulatory data system does not allow for revocation data to be extracted for homes |
| A1.2.4 How many programs were terminated from participation in CCDF subsidies due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year (October 1, 2012 through September 30, 2013)? |
| Child Care Centers: ☑ N/A |
| Group Child Care Homes: ☑ N/A |
| Family Child Care Homes: N/A |
| In-Home Providers: |

| ▼ N/A |
|--|
| Describe: Provider agreements can be revoked but such action is not tracked in the current subsidy tracking system. |
| A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year (October 1, 2012 through September 30, 2013)? |
| ☑ N/A |
| Describe: "Licensed exempt" in this context for Iowa = school-based, school-operated programs currently not required to be licensed by the Lead Agency. This information is not tracked in the child care licensing information system. |
| We do not track the # of non-registered home providers who become registered. The # of new Child Development Home registrations issued were 2,404 during SFY12. However, the system will not allow a query to distinguish between new registrations or renewals. |
| A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year? Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). |
| ☑ N/A |
| Describe: State does not have an injury surveillance system. Strategies are in development with our Department of Public Health Healthy Child Care Iowa initiative and other partners to develop and pilot mechanisms to collect information on child care injuries. |
| A1.2.7 How many fatalities occurred in child care as of the end of the last year? Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). |
| 2 N/A |
| Describe: |
| For SFY13 (7/1/12 -6/30/13): |
| 1 death occurred in a non-registered home that was the result of abuse1 death occurred in a registered child development home that was the result of abuse |
| 0 deaths occurred in licensed child care centers from the result of abuse. |

Establishing Early Learning Guidelines (Component #2)

A2.1 Progress on Overall Goals

| A2.1.1 Did the State/Territory make any changes to its voluntary early lear | ning |
|--|----------|
| guidelines (including guidelines for school-age children) as reported in 3.2 | 2 during |
| the last fiscal year (October 1, 2012 through September 30, 2013)? | |

| ▼ Yes | |
|------------------|--|
| □ No | |
| □ _{N/A} | |
| Describe: | |

In the Fall 2012, the IELS were revised for the following content and formatting changes: a seventh content area, social studies, was added to describe the role of family, community, and culture in children's lives; the most up-to-date research was added to the rationale for each standard; research and resources used within the rationale are listed at the end of each standard; the role of a child's home language was added to the communication, language, and literacy content area and additional benchmarks for preschool English language learners were defined; the term "caregiver" has been changed to "adult" to be inclusive of all those caring for, working with, or educating young children; additional examples of benchmarks and adult supports were included to demonstrate the various settings and adults that children will interact with; and an alignment between the IELS and the Kindergarten to 12th Grade lowa Core has been included to show that the knowledge and skills gained in the first five years prepares children for school

A2.1.2 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.2.8, please report your progress. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELGs, Aligned the ELGs with Head Start Outcomes Framework). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2012-2013 CCDF Plan:

Implement professional development opportunities in using curriculums and developmental assessment tools: A key area of need related to Iowa's Early Learning Guidelines is in improving provider's understanding and use of curriculums and developmental assessments tools. Under the direction of and funding available within the ECI Professional Development component group, training opportunities will be developed regarding appropriate use of curriculums and providers' role in using developmental assessment tools.

| Is Goal from 2012-2013 CCDF Plan? | ☑ Yes | □ No |
|-----------------------------------|-------|------|
|-----------------------------------|-------|------|

Implement professional development opportunities in using curriculums and developmental assessment tools: A key area of need related to Iowa's Early Learning Guidelines is in improving provider's understanding and use of curriculums and developmental assessments tools. Under the direction of and funding available within the ECI Professional Development component group, training opportunities will be developed regarding appropriate use of curriculums and providers' role in using developmental assessment tools.

Describe Progress - Include Examples and Numeric Targets where Possible:

In 2012, the lowa Legislature charged the lowa Department of Education with prescribing a kindergarten readiness assessment to be administered to all prekindergarten or four-year-old children enrolled in each school district. The new language required a multi-domain assessment aligned with state early learning standards and encouraged districts to administer the assessment at least at the beginning and end of the preschool program. A task force recommended that the use of the GOLD online assessment system provided the best fit in meeting the intent of the legislation. Approximately 80 percent of the lowa school districts providing the preschool program currently use the GOLD online assessment system. This system provides access to data at the local and state level. The GOLD online assessment system assists teachers in individualizing instruction and planning lessons. The system also allows families to view assessment information, and it generates reports for teachers to share with families. While it has been implemented minimally in smaller pockets of community-based center settings, conversations are ongoing as to how an assessment of this magnitude might be implemented throughout the whole of the child care provider community.

Efforts to institute a standardized training effort for providers on the appropriate use of curriculum have been delayed due to other competing priorities. However, this continues to be an area of focus/interest of the ECI Professional Development component group.

A2.2 Key Data

A2.2.1 How many programs were trained on early learning guidelines (ELGs) or standards over the last fiscal year (October 1, 2012 through September 30, 2013)?

| Center-based Programs: Early Learning Guidelines (ELGs) | How many center-based programs were trained on ELGs over the past year? | N/A |
|--|---|-----|
| Birth to Three ELGs | | ☑ |
| Three-to-Five ELGs | | V |
| Five and Older ELGs | | ✓ |

| Describe: | This information requires a state system response and is not information solely maintained by the Lead Agency. The Lead Agency partnered with the Dept of Education and many stakeholders in the initial development of ELG's for both the birth-3 and 3-5 populations. The ELG's have not been viewed as a static curriculum to be delivered as a training. Rather, there is an expectation that training across an allowable array of topics incorporate the ELG's. As such, the Lead Agency is not able to report on the number of providers who received training on the ELG's or the number of children cared for in those programs. In the Fall 2012, the Early Childhood Iowa Professional Development component group facilitated a revision of the ELG's. An implementation plan is in development, which will include delivery of a targeted curriculum appropriate for child care providers. This may lend to improved reporting in the future. | |
|---|--|---|
| Family Child Care | | |
| Programs: | How many family child care programs were trained on ELGs over the past | N/A |
| Early Learning Guidelines (ELGs) | year? | N/A |
| Birth to Three ELGs | | V |
| Three-to-Five ELGs | | V |
| Five and Older ELGs | | V |
| Describe: | This information requires a state system response a solely maintained by the Lead Agency. The Lead Agency of Education and many stakeholders in the inition both the birth-3 and 3-5 populations. The ELG's a static curriculum to be delivered as a training. Ratexpectation that training across an allowable array of ELG's. As such, the Lead Agency is not able to reproviders who received training on the ELG's or the for in those programs. In the Fall 2012, the Early Chevelopment component group facilitated a revision implementation plan is in development, which will intargeted curriculum appropriate for child care providimproved reporting in the future. | gency partnered with the ial development of ELG's have not been viewed as ther, there is an of topics incorporate the ort on the number of number of children cared hildhood lowa Professional of the ELG's. An clude delivery of a |
| Legally Exempt Providers: Early Learning Guidelines (ELGs) | How many legally exempt providers were trained on ELGs over the past year? | N/A |
| Birth to Three ELGs | | V |
| Three-to-Five ELGs | | V |
| Five and Older ELGs | | ☑ |
| This information requires a state system response and is not information solely maintained by the Lead Agency. The Lead Agency partnered with the Dept of Education and many stakeholders in the initial development of ELG's for both the birth-3 and 3-5 populations. The ELG's have not been viewed as a static curriculum to be delivered as a training. Rather, there is an expectation that training across an allowable array of topics incorporate the ELG's. As such, the Lead Agency is not able to report on the number of providers who received training on the ELG's or the number of children cared for in those programs. In the Fall 2012, the Early Childhood Iowa Professiona Development component group facilitated a revision of the ELG's. An implementation plan is in development, which will include delivery of a targeted curriculum appropriate for child care providers. This may lend to improved reporting in the future. | | |

2.2.1(b) How many children are served in programs implementing the ELGs? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)

| Center-based Programs: Early Learning Guidelines (ELGs) | How many children are served in programs implementing the ELGs? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | N/A |
|---|---|-----|
| Infants and toddlers in programs implementing the Birth to Three ELGs | | |
| Preschoolers in programs implementing the Three-to-Five ELGs | | |
| School-age children in programs implementing the Five and Older ELGs | | |
| Describe: | This data is not available. | |
| Family Child Care Programs: Early Learning Guidelines (ELGs) | How many children are served in programs implementing the ELGs? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | N/A |
| Infants and toddlers in programs implementing the Birth to Three ELGs | | V |
| Preschoolers in programs implementing the Three-to-Five ELGs | | |
| School-age children in programs implementing the Five and Older ELGs | | ☑ |
| Describe: | This data is not available. | |
| Legally Exempt Providers: Early Learning Guidelines (ELGs) | How many children are served in programs implementing the ELGs? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | N/A |
| Infants and toddlers in programs implementing the Birth to Three ELGs | | |
| Preschoolers in programs implementing the Three-to-Five ELGs | | |
| School-age children in programs implementing the Five and Older ELGs | | ☑ |

Describe: This data is not available.

Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

A3.1 Progress on Overall Goals

A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an onsite quality consultant). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2012-2013 CCDF Plan:

Increase QRS participation: Under a voluntary QRS, lowa has had significant provider participation and continues to support strategies to increase participation. With a recent 'recalibration' of the QRS, and performance measures identified within the CCR&R contracts, lowa continues to support efforts to increase participation.

| Goal #1: | 100 Martin |
|-----------------------------------|------------|
| Is Goal from 2012-2013 CCDF Plan? | Yes No |

Increase QRS participation: Under a voluntary QRS, Iowa has had significant provider participation and continues to support strategies to increase participation. With a recent 'recalibration' of the QRS, and performance measures identified within the CCR&R contracts, Iowa continues to support efforts to increase participation.

Describe Progress - Include Examples and Numeric Targets where Possible:

From 7-1-12 to 7-1-13, QRS participation increased from 1137 to 1401 total programs participating, an increase of 23%.

A3.2 Key Data

A3.2.1 How many programs received targeted technical assistance in the following areas during the last fiscal year (October 1, 2012 through September 30, 2013)?

| areas during the last listal year (October | 1, 2012 through September 30, 2013)? |
|--|--------------------------------------|
| Health and safety: | |

Infant and toddler care:

School-age care:

| Inclusion: |
|---|
| Teaching dual language learners: |
| Understanding developmental screenings and/or observational assessment tools for program improvement purposes: |
| Mental health: |
| Business management practices: |
| ☑ N/A |
| Describe: |
| The Lead Agency is unable to provide data for the technical assistance delivered under its control/contracts to this level of detail. Data can be provided for: number of programs receiving TA, the number receiving on-site TA, and total number of on-site visits completed. |
| A3.2.2 How many programs received financial support to achieve and sustain quality during the last fiscal year (October 1, 2012 through September 30, 2013)? |
| a) One-time, grants, awards or bonuses: |
| Child Care Centers: |
| Family Child Care Homes: |
| 311 □ N/A |
| Describe: |
| The data reflects only those programs funded by the Lead Agency only under the state's Quality Rating System. This is fiscal year data as of 9-30-13. Centers includes school based and operated |
| b) On-going or Periodic quality stipends: |
| Child Care Centers: |
| Family Child Care Homes: |
| O N/A |
| Describe: |

A3.2.3 What is the participation rate (number and percentage) in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year (October 1, 2012 through September 30, 2013)? When reporting the percentages, please indicate the universe of programs on which the percentage is based (e.g., licensed providers, CCDF providers, or all providers).

| Child Care Centers QRIS: |
|---|
| Number: |
| 627 Percentage: 40 % |
| reiteillage. 40 /6 |
| or Other Quality Improvement System: |
| Number: |
| 0 |
| Percentage: 0 % |
| □ N/A |
| Describe: |
| This is data from 9-30-13. Centers includes school based and operated |
| Family Child Care Homes QRIS: |
| Number: |
| 651 |
| Percentage: 17 % |
| or Other Quality Improvement System: |
| Number: |
| O Devocate and 0 0/ |
| Percentage: 0 % |
| □ N/A |
| |

Describe:

This data is from 9-30-13

| License-Exempt Providers QRIS: |
|--|
| Number: |
| Percentage: % |
| or Other Quality Improvement System: |
| Number: |
| Percentage: % |
| ✓ N/A |
| Describe: |
| The only licensed exempt providers eligible for QRS participation are school based and operated programs under the jurisdiction of the Department of Education. These participants are reported under the center data. |
| A3.2.4 How many programs moved up or down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year (October 1, 2012 through September 30, 2013)? If the quality threshold is something other than QRIS, describe the metric used, such as accreditation. |
| Child Care Centers: |
| How many moved up within the QRIS: How many moved down within the QRIS: ✓ N/A |
| Describe: |
| |

Current data tools do not allow an analysis for programs that move up within the QRS or those that may have had legitimate reasons for achieving a lower rating at reapplication. The Lead Agency believes that if tracking is to occur, it should also legitimize those providers who are able to maintain a rating, for that often requires a tremendous amount of effort and resources by the provider but often goes unacknowledged by the public.

| Family Child Care Homes: |
|--------------------------------------|
| |
| How many moved up within the QRIS: |
| How many moved down within the QRIS: |
| ✓ N/A |

Describe:

Current data tools do not allow an analysis for programs that move up within the QRS or those that may have had legitimate reasons for achieving a lower rating at reapplication. The Lead Agency believes that if tracking is to occur, it should also legitimize those providers who are able to maintain a rating, for that often requires a tremendous amount of effort and resources by the provider but often goes unacknowledged by the public.

License-Exempt Providers:

How many moved up within the QRIS:
How many moved down within the QRIS:

✓ N/A

Describe:

Current data tools do not allow an analysis for programs that move up within the QRS or those that may have had legitimate reasons for achieving a lower rating at reapplication. The Lead Agency believes that if tracking is to occur, it should also legitimize those providers who are able to maintain a rating, for that often requires a tremendous amount of effort and resources by the provider but often goes unacknowledged by the public.

A3.2.5 How many programs are at each level of quality? Describe metric if other than QRIS, such as accreditation.

Child Care Centers:

Please provide the total number of Child Care Center quality levels (if available):

□ N/A

| Quality Level | Number of Programs at this level |
|---------------|----------------------------------|
| 1 | 10 |
| 2 | 168 |
| 3 | 133 |
| 4 | 288 |

| 5 | |
|--|--|
| <u> </u> | 52 |
| | |
| | |
| scribe: | |
| and avampt in this contact is our ashaal b | and school operated programs |
| ense-exempt in this context is our school-back a from 7-1-13. Centers include school bas | |
| | and the operation. |
| | |
| mily Child Care Homes: | |
| This office date Hornes. | |
| | |
| ease provide the total number of Fam | ily Child Care Home quality levels (if available) |
| N/A | |
| IN/A | |
| Quality Level | Number of Programs at this level |
| 1 | 69 |
| 2 | 433 |
| 3 | 88 |
| 4 | 138 |
| 3 | 22 |
| 5 | |
| 5 | |
| | |
| | 22 |
| scribe: | |
| scribe: ense-exempt in this context is our school-ba | ased, school-operated programs. |
| escribe: ense-exempt in this context is our school-ba | ased, school-operated programs. |
| escribe: ense-exempt in this context is our school-ba | ased, school-operated programs. |
| scribe: ense-exempt in this context is our school-bate ta from 7-1-13. Centers include school bas | ased, school-operated programs. |
| escribe: cense-exempt in this context is our school-bata from 7-1-13. Centers include school base | ased, school-operated programs. |
| escribe: sense-exempt in this context is our school-base at a from 7-1-13. Centers include school base cense-Exempt Providers: | ased, school-operated programs. sed and operated. |
| scribe: ense-exempt in this context is our school-bata from 7-1-13. Centers include school baseense-Exempt Providers: | ased, school-operated programs. |
| ense-exempt in this context is our school-bata from 7-1-13. Centers include school basecense-Exempt Providers: | ased, school-operated programs. sed and operated. |
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Describe:

License-exempt in this context is our school-based, school-operated programs. Data from 7-1-13. Centers include school based and operated.

A3.2.6 What percentage of CCDF subsidized children were served in a program participating in the State or Territory's quality improvement system during the last fiscal year (October 1, 2012 through September 30, 2013)? What percentage are in high quality care as defined by the State/Territory?

Note. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

Percentage of CCDF children served in participating programs: 27%

Percentage of CCDF children served in high quality care: 17%

(May define with assessment scores, accreditation, or other metric, if no QRIS.)

Describe:

License-exempt in this context is our school-based, school-operated programs. Data from 7-1-13. Centers include school based and operated.

Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)

A4.1 Progress on Overall Goals

A4.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.4.7, please report your progress. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2012-2013 CCDF Plan:

Establish under ECI-Professional Development an approval process for training organizations: The Department currently administers a training approval process for any approved training entity not identified in regulations. The state needs a consistent training organization approval process to assure the quality and integrity of the vast amount of training that is available for child care providers.

Increase participation rate in child care training registry: The Department administers a Child Care Provider Training Registry. An increase in the number of training organizations listing their training opportunities and the number of providers using the registry to enroll in and track their training would maximize the value of this data system.

Increase in the number of CCR&R consultants who have 1) completed the I-Consult training and 2) achieved the I-Consult credential:

The I-Consult training developed by Iowa State University provides a common framework for developing consistent consultation competencies across the pool of consultants. Achievement of the I-Consult credential offers a measure of integrity to the work and begins to build a peer-mentor infrastructure.

| Goal #1: | |
|-----------------------------------|--------|
| Is Goal from 2012-2013 CCDF Plan? | Yes No |

Establish under ECI-Professional Development an approval process for training organizations: The Department currently administers a training approval process for any approved training entity not identified in regulations. The state needs a consistent training organization approval process to assure the quality and integrity of the vast amount of training that is available for child care providers.

Describe Progress - Include Examples and Numeric Targets where Possible:

Under the guidance of the Early Learning Leadership Team (EL LT) - a work team that exists under the direction of the Early Childhood Iowa Professional Development component group - efforts have begun to establish a more formal structure to guide the professional development received by child care providers. In an effort to pave the way for a potential state-level, ECI-led training organization approval process, the EL LT has focused its initial effort on the development of adult educator competencies. Work is continuing on a cross-agency effort for an approval system for professional development for all early childhood providers.

| G0ai #2: | |
|-----------------------------------|------------|
| Is Goal from 2012-2013 CCDF Plan? | 🗹 Yes 🗖 No |

Caal #2.

Increase participation rate in child care training registry: The Department administers a Child Care Provider Training Registry. An increase in the number of training organizations listing their training opportunities and the number of providers using the registry to enroll in and track their training would maximize the value of this data system.

Describe Progress - Include Examples and Numeric Targets where Possible:

Participation in the training registry increased from 13,200 users at the end of FFY2012 to 17,025 at the end of FFY 2013. The number of training organizations listing their training opportunities in the training registry increased from 44 (at the end of FFY2012) to 47 (at the end of FFY 2013).

| Goal #3: | |
|-----------------------------------|--------|
| Is Goal from 2012-2013 CCDF Plan? | Yes No |

Increase in the number of CCR&R consultants who have 1) completed the I-Consult training and 2) achieved the I-Consult credential:

The I-Consult training developed by Iowa State University provides a common framework for developing consistent consultation competencies across the pool of consultants. Achievement of the I-Consult credential offers a measure of integrity to the work and begins to build a peer-mentor infrastructure.

Describe Progress - Include Examples and Numeric Targets where Possible:

In sfy13, 17 consultants and their mentors or supervisors competed Level 1 Consultations Essentials training. A total of 15 consultants and their supervisors or mentors participated in the Level 2 Consultation Credentialing program. All 15 consultants earned their Consultation Credential. A total of 5 consultants and their five supervisors participated in Level 3 Mentoring Credential program. Five consultants earned their Mentoring Credential.

A4.2.1 How many teachers/caregivers had the following qualifications as of the end of the last fiscal year (as of September 30, 2013)?

A4.2 Key Data

Child Care Center Teachers:

How many had a Child Development Associate (CDA)?

✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it



How many had <u>State/Territory Credentials</u>?
✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had an <u>Associate's degree</u>?
✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had a <u>Bachelor's degree</u>?
✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had a <u>Graduate/Advanced degree?</u>

✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of

the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

Family Child Care Providers:

How many had a Child Development Associate (CDA)? ☑ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had State/Territory Credentials? □ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had an Associate's degree? ☑ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had a Bachelor's degree?



Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

How many had a <u>Graduate/Advanced degree?</u>

✓ N/A

Describe:

This information requires a state system response and is not information solely maintained by the Lead Agency. While the Lead Agency does operate a Child Care Provider Training Registry (TR), the use of the TR is not mandatory across all provider types (including Head Start and programs under the jurisdiction of the Dept. of Education). While some of the requested information is collected in the TR, it is currently unverified and is entered as "self-report." The TR also does not allow the Lead Agency to filter education level by job category.

A4.2.2 How many teachers/caregivers were included in the State/Territory's professional development registry during the last fiscal year (October 1, 2012 through September 30, 2013)?

Staff in child care centers: 4963

Family child care home providers: 3813

License-exempt practitioners: 27

□ N/A

Describe:

License-exempt in this context is our school-based, school-operated programs.

A4.2.3 How many teachers/caregivers received credit-based training and/or education as defined by the State/Territory during the last fiscal year (October 1, 2012 through September 30, 2013)?

Staff in child care centers:

Family child care home providers:

License-exempt practitioners:

☑ N/A

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Neither the Iowa Child Care Provider Training Registry nor the Child Care Resource and Referral agencies track credit based training.

A4.2.4 How many credentials and degrees were awarded during the last fiscal year (October 1, 2012 through September 30, 2013)? If possible, list the type of credential or degree and in what type of setting the practitioner worked.

Type of Credential:

How many <u>credentials</u> were awarded to <u>staff in child care centers</u>?

Please list and provide number:

Child Development Associate (CDA):

State/Territory Credentials:

Other:

☑ N/A

Describe:

The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system, including not only the lead agency but other entities such as community and 4-year colleges and universities

How many credentials were awarded to family child care home providers?

Please list and provide number:

Child Development Associate (CDA):

State/Territory Credentials:

Other:

□ N/A

Describe:

The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system, including not only the lead agency but other entities such as community and 4-year colleges and universities

How many credentials were awarded to license-exempt practitioners?

Please list and provide number:

Child Development Associate (CDA):

State/Territory Credentials:

| Other: ☑ N/A |
|---|
| Describe: The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system, including not only the lead agency but other entities such as community and 4-year colleges and universities |
| Type of Degree: |
| How many <u>degrees</u> were awarded to staff <u>in child care centers</u> ? |
| Please list and provide number: |
| Associates: Bachelors: Graduate/Advanced Degree: Other: ■ N/A |
| Describe: The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system, including not only the lead agency but other entities such as community and 4-year colleges and universities |
| How many degrees were awarded to family child care home providers? |
| Please list and provide number: |
| Associates: Bachelors: Graduate/Advanced Degree: Other: N/A |
| Describe: The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system, including not only the lead agency but other entities such as community and 4-year colleges and universities |
| How many degrees were awarded to license-exempt practitioners? |
| Please list and provide number: |
| Associates: Bachelors: |

Graduate/Advanced Degree:

The Lead Agency does not collect the number of staff who received TA. The Lead Agency can only report on the number of programs receiving TA.

| as of the end of the last fiscal year (October 1, 2012 through September 30, 2013)? |
|---|
| ☐ Scholarships. |
| How many teachers received? |
| Reimbursement for Training Expenses. |
| How many teachers received? |
| □ Loans. |
| How many teachers received? |
| □ Wage supplements. |
| How many teachers received? |
| □ Other. |
| ☑ N/A |
| Describe: |

A4.2.6 What financial supports were funded over the past fiscal year to support teachers and caregivers in meeting and maintaining standards and qualifications

The requested information is not tracked in a formalized data system by the Lead Agency. Data collection effort is larger than the Lead Agency, and would require a systemic response across the early childhood system. Support may be available to providers through the Dept. of Education or Early Childhood Iowa Areas, but varies from area to area across the state. While the FFY1213 state plan for Iowa indicates scholarships and reimbursement for training are offered to providers, that response is in the context of the other elements of the state early childhood system that support providers in this regard and not direct funding/support from the Lead Agency.